

INTRODUCTION TO THE TECHNICAL ASSISTANCE PROGRAM FOR CREDIT UNIONS

PURPOSE OF THE PROGRAM

The Community Development Revolving Loan Fund Program (CDRLP) was established to support credit unions serving low-income communities. Low-interest loans/deposits are made available to assist these credit unions in delivering financial services to their members and improve their long-term growth and stability. The interest generated from the CDRLP is used to provide technical assistance grants to credit unions. These grants are provided to improve these credit unions' ability to serve their members.

TO PARTICIPATE

Federal credit unions must have a current low-income designation from the National Credit Union Administration (NCUA) regional director for their region.

State credit unions must have a current low-income designation from their state supervisory authority (SSA) with NCUA concurrence.

Low-income college student credit unions are not eligible to participate in the Technical Assistance Program.

Applications should be submitted to:

National Credit Union Administration
Office of Community Development Credit Unions
1775 Duke Street
Alexandria, Virginia 22314-3428

ALLOWABLE AMOUNTS

Grant amounts are based upon availability of funds. Our goal is to grant technical assistance to those credit unions where funding could make the greatest impact on improving operations. Since funding is limited, smaller technical assistance grants enables a larger number of credit unions to participate.

TERMS AND CONDITIONS

Credit unions may apply for grants anytime during the year. We encourage credit unions to give careful consideration to their request, so that repeated requests are minimal.

The average technical assistance application is processed in 30-45 days. Given this length of turnaround time, we encourage credit unions to allow ample time for a reply to avoid disqualifying their request. Technical assistance must be approved in advance of the credit union committing to the service or purchase.

Once the request for technical assistance is approved, the credit union must submit proof of service or purchase for payment to the Community Development Credit Union Office.

EVALUATING APPLICATIONS

Purpose: Grants will be made to credit unions for purposes which result in increased services to members, or to improve the long-term financial health and stability of the credit union.

Acceptable purposes include, but are not limited to:

- Developing a marketing plan
- Putting the marketing plan into action
- Subsidizing a Strategic Planning session
- Training for staff
 - bookkeeping
 - budgeting
 - planning
 - lending
- Implementing services
 - share drafts
 - check cashing
 - credit/debit card
 - ATM

We will consider reoccurring expenses, such as auditing fees, only if justified by the credit union and with the NCUA regional director's and SSA's (if applicable) concurrence.

Financial condition: If the technical assistance request exceeds \$500.00, the credit union must attach an explanation to its application regarding the following:

1. The credit union must demonstrate that the grant requested fits in with the credit union's mission of service;
2. The credit union must also demonstrate how these funds will enable them to provide better service; and
3. The credit union must show how the cost of their request could not be accomplished through their own financial resources.

APPLICATION FOR TECHNICAL ASSISTANCE

Credit Union Name

Charter/Ins. Number

Mailing Address

Credit Union Phone Number

Fax Number

Contact Person & Phone Number

Credit Union Days/Hours Operation

AMOUNT REQUESTED

Year Organized

Assets most recent

12/31

Number of Members

Potential members

ITEMIZE PROPOSED USE OF FUNDS AND ITEMIZE COSTS

LIST VENDOR(s) TO SUPPLY SERVICE

PRIOR APPROVAL NECESSARY FOR TECHNICAL ASSISTANCE COVERAGE

Submit most recent financial statement and other required information with application

THE TECHNICAL ASSISTANCE PROGRAM
APPLICATION INSTRUCTIONS

Please complete all information thoroughly

CREDIT UNION INFORMATION

- A) **Credit Union Name** = Please include complete credit union name.
- B) **Charter/Ins. Number** = Number given by NCUA to identify credit union.
- C) **Mailing Address** = Complete and full address, including any PO Box numbers, room numbers, zip code.
- D) **Fax Number** = Please include for credit union office. If credit union does not have a fax, please attempt to locate one that could be used.
- E) **Contact Person & Phone Number** = Please list the person who should be contacted regarding this application. Include a daytime telephone number.
- F) **Credit Union Days/Hours Operation** = Please list specific days and times the credit union is open. If the hours differ from those of the contact person listed above, please also include the hours the contact person is available.
- G) **Amount Requested** = State the exact dollar amount being requested.
- H) **Year Organized** = When was the credit union chartered?
- I) **Number of Members** = State number of members in credit union as of the most recent year-end .
- J) **Assets as of the most recent 12/31** = State dollar amount of assets in credit union as of December 31.
- K) **Potential Members** = State number of members in credit union's field of membership.
(i.e., sponsor + family members)
- L) **Itemize Proposed Use of Funds and Itemize Costs** = State specifically what the credit union wants to do with the funds requested. Itemize each purpose clearly. Specifically state the cost associated with each purpose listed.

M) **List Vendor(s) to Supply Service** = State specifically all providers of service. If request is to purchase merchandise, list the vendor providing merchandise.

ALL TECHNICAL ASSISTANCE MUST BE APPROVED PRIOR TO THE SERVICE OR PURCHASE REQUESTED.

INCOMPLETE APPLICATIONS ARE NOT CONSIDERED SUBMITTED UNTIL ALL INFORMATION REQUESTED HAS BEEN RECEIVED.

SUBMIT MOST RECENT MONTH-END FINANCIAL STATEMENT WITH THE APPLICATION.